## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

09/976283

			·									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL EI	YTITY	00	OTHER	
TO	OTAL CLAIMS		(COIUITII)	<u></u>	COIU	11111 2)	Ė	RATE	FEE	OR <b>1</b>	SMALL RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE		OR	BASIC FEE	# DC
TC	TAL CHARGE	minus 20=		*		<b>-</b>		42 (2		X\$ <i>57</i> =	4 170	
INI	DEPENDENT CI		nus 3 =	*		$\vdash$	X\$25≡		OR			
	JLTIPLE DEPEN	<u> </u>				ŀ	YE		OR	×200=		
L				i				+/80		OR	+360=	
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL										OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY									CNITITY		OTHER SMALL	
_	(Column 1) CLAIMS			(Colur HiGH		(Column 3)		SWALL	ADDI-	OR 1 I	SWALL	ADDI-
AMENDMENTA		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	.**		±	X\$ <b>V</b> =		ÖR	<b>5°</b> X\$ <b>4</b> €=		
	Independent	*	Minus	***		=		768 X <del>42</del> =			×840	
	FIRST PRESE	JLTIPLE DEF	PENDENT	CLAIM		+	180		OR	360 +280=		
								+140=		OR		
·							ĄC	TOTAL DDIT: FEE	100	OR	TOTAL ADDIT: FEE	
		(Column 1)		(Colur	الكشادات	(Column 3)				l gaz i l		
AMENDMENT B		REMAINING AFTER	2.5	NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		*AMENDMENT		PAID				25	ree			FEE
	Total	·50	Minus	* 6	0			X\$ P≣©		QΡ	X	
	Independent	. 3	Minus 💯	***	ever ever			<b>/</b> 42		OR	¥ ₩	
	FIRST PRESE	NTATION:OF MU	JENPCE DEF	PENDENI	CLAIM.			180		С	360	
							L	TOTAL			TOTAL	
							ΑC	DOIT FEE		OR	ADDIT FEE	
		(Column 1) = CLAIMS		(Colur HIGH	EST	(Column 3)			ABBIT			LABBI
AMENDMENTC		REMAINING AFTER		PREVIO		PRESENT: EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
MEN		AMENDMENT		PAID	FOR			-257	FEE.		<i>5</i> 0	OFFER.
QN	Total	*	Minus	**		E		X\$ <b>`%</b> =		OR	,X\$ <del>18</del> ≑	
AME	Independent		Minus	****				X120		OR	200 X <del>01</del> ≡	
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	PENDENT	CLAIM			180			360	
を行う					"O" :-			+ <del>140</del> ≟ ∕,		OR:	+ <del>280</del> ≡	
**	If the "Highest Nu	mn 1 is less than th mber Previously Pa	id For" IN THI	SSPACE	s less tha	n 20, enter "20."	ΑĎ	TOTAL DIT FEE		OR.	A TOTAL ADDIT FEE	
. ***	If the "Highest Nu The "Highest Nun	mber Previously Pa nber Previously Pai	aid For" IN THI d For" (Total o	S SPACE i Independe	s less tha ent) is the	in 3, enter "3." Highest number	1 110		propriate box	c in col	úmn 1	a sansaharing